

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number 09/383,038 Filing Date August 25, 1999 First Named Inventor Charles B. Schnarel Group Art Unit 2174 Confirmation Number 6021 Examiner Name Steven Paul Sax Attorney Docket Number 117045.04
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TRANSMITTAL FORM

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ENCLOSURES (*check all that apply*)

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| <p><input type="checkbox"/> Fee Transmittal Form
 <input type="checkbox"/> Fee Attached</p> <p><input checked="" type="checkbox"/> Amendment / Reply (27 pages)
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 <input type="checkbox"/> Affidavits/declaration(s)</p> <p><input checked="" type="checkbox"/> Extension of Time Request (1 month)</p> <p><input type="checkbox"/> Express Abandonment Request</p> <p><input type="checkbox"/> Information Disclosure Statement with Form PTO/SB/08A (pages)</p> <p><input type="checkbox"/> Response to Notice to File Missing Parts
 <input type="checkbox"/> A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5</p> | <p><input type="checkbox"/> Assignment Papers
 <i>(for an Application)</i></p> <p><input type="checkbox"/> Drawing(s) (sheets)</p> <p><input type="checkbox"/> Declaration
 <input type="checkbox"/> Newly Executed (pages)
 <input type="checkbox"/> A copy from a prior application (37 CFR 1.63(d)) (pages)</p> <p><input type="checkbox"/> Licensing-related Papers</p> <p><input type="checkbox"/> Petition</p> <p><input type="checkbox"/> Petition to Convert to a Provisional Application</p> <p><input type="checkbox"/> General Power of Attorney (SB80)
 <input type="checkbox"/> 37 CFR 3.73(b) Statement</p> <p><input type="checkbox"/> Terminal Disclaimer</p> <p><input type="checkbox"/> Request for Refund</p> | <p><input type="checkbox"/> After Allowance Communication to TC</p> <p><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences</p> <p><input type="checkbox"/> Appeal Communication to TC
 <i>(Appeal Notice, Brief, Reply Brief)</i></p> <p><input type="checkbox"/> Proprietary Information</p> <p><input type="checkbox"/> Status Letter</p> <p><input type="checkbox"/> Application Data Sheet</p> <p><input type="checkbox"/> Request for Corrected Filing Receipt</p> <p><input type="checkbox"/> Return Receipt Postcard</p> <p><input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>):
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(Under 37 CFR § 1.8(a))

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SIGNATURE OF ATTORNEY OR AGENT

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